



# Self Funded Plans Materials Order Form

*REVISED AUGUST 2005      PLEASE DESTROY ALL PRIOR FORMS*

**FAX FORM TO: (804) 780-0198**  
 ALLOW TEN DAYS FOR DELIVERY OF MATERIALS

Enrollment Packages			Member Handbooks with Notification of Changes		Qty.
Active and/or Retiree Not Eligible for Medicare		Qty.			
T20438	Key Advantage w/Expanded Benefits		T20450	Key Advantage w/Expanded Benefits	
T20439	Key Advantage 200		T20451	Key Advantage 200	
T20440	Key Advantage 300		T20452	Key Advantage 300	
T20441	Key Advantage 500		T20453	Key Advantage 500	
Retirees Eligible for Medicare			T20078	Advantage 65	
T20447	Advantage 65		T20084	Medicare Dental/Vision	
T20449	Dental/Vision Plan Offered With Advantage 65		T20076	Medicare Complementary	
T20448	Medicare Complementary		Notification of Changes Only		
Forms and Provider Directory			Advantage 65		
T20436	Anthem Medical Provider Directory		Medicare Dental/Vision		
T20465	Enrollment Form		Medicare Complementary		
990046	Name and Address Change Form				
110602	Anthem Claim Form				

- To order **ValueOptions** materials, call 1-866-725-0602. You may also fax a request to 919-941-5242, Attn: Account Services.
- To order **Delta Dental Plan of Virginia** materials, call Terri Green at 1-800-237-6060 x 3370.
- To order **Medco** prescription drug forms below, call 1-800-316-9182:  
 Medco Home Delivery Order Form (HB905518)  
 Medco Health Assessment Questionnaire (GNPRF)  
 Medco Prescription Drug Claim Form (C1001)

<b>Group Name</b>	<b>Date</b>
<b>Attention</b>	<b>Group #</b>
<b>Street Address (Do no use P.O. Box)</b>	<b>Telephone #</b>
<b>City, State and Zip</b>	<b>Fax #</b>

For questions about materials ordered on this form, call (804) 354-4919  
 Most items, including this order form,  
 are available on the Web at: [www.thelocalchoice.virginia.gov](http://www.thelocalchoice.virginia.gov)